Statistical Bulletin

METROPOLITAN LIFE INSURANCE COMPANY

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Health of Teen-Agers

THE TEENS are the healthiest years of life. During those years the frequency of disabling disease and the time lost because of illness are at a minimum. The teen ages follow close after the age of lowest mortality, and the death rate remains relatively low, though rising steadily. Details regarding the hazards to teen-age life, derived from the experience among white Industrial policyholders of the Metropolitan Life Insurance Company, are shown in the chart on page 2 and the table on page 3.

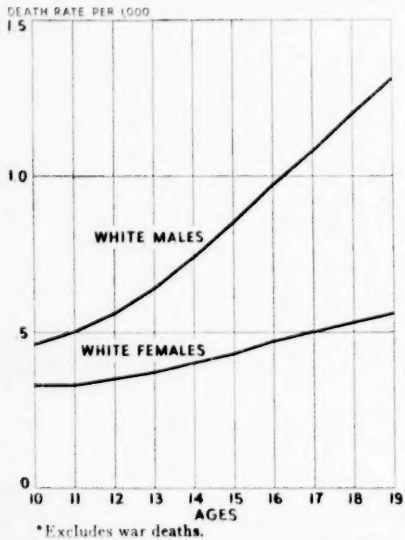
Within the teen-age period the rise in the death rate is continuous, but much more rapid for boys than for girls, as is evident in the accompanying chart. Thus, in this insurance experience, which relates to 1952, the death rate among males doubled between ages 13 and 19 years, the rate rising from 0.64 to 1.31 per 1,000; however, the rate among females increased by only one half—from 0.37 to 0.56 per 1,000. As a result of these changes, the excess of male over female mortality increased from about 75 percent near the beginning of the teen-age period to 133 percent at its end. In this comparison, Korean battle deaths among teen-age males were excluded.

Deaths from violence—chiefly accidents—constitute the major threat to teen-age life, according to the data in the table. For both sexes, the chance of accidental death rises steadily through the teen-age period, but the hazard is much greater for boys than for girls. Thus, in 1950-1952, the death rate from accidents for girls doubled from ages 13-14 years to 18-19 years, when it reached a level of 14.7 per 100,000. Meanwhile the death rate for boys almost tripled over the same age range, reaching a level of 85.7 per 100,000 at ages 18-19 years. About one fifth of the accidental deaths among these older teen-age boys occurred in military service.

The importance of accidents in the total mortality at these ages is also evident in their ratio to deaths from all causes. Among boys this ratio rises from somewhat less than one half at age 13-14 years to almost two thirds at ages 18-19 years. For girls the ratio rises from one fifth at 13-14 years to more than one fourth at the later teen ages.

Motor vehicle fatalities are the leading cause of accidental death among teen-agers and increase rapidly in relative importance during this period of life. At ages 18-19

Death Rates* per 1,000 at Ages 10 to 19
Metropolitan Life Insurance Company Industrial Department, 1952



*Excludes war deaths.

years motor vehicle accident fatalities accounted for almost two thirds of all accidental deaths among boys and for about four fifths of those among girls. In fact, for teen-age girls the mortality from other types of accidents was quite small.

Among teen-age boys, drowning ranked second among accidental deaths throughout the period, the death rate rising steadily with age. Firearms was the third ranking accidental cause of death among boys. The entry of 18- and 19-year-old boys into economic life is reflected in their mortality from occupational accidents, which accounted for more than one tenth of all accidental deaths among those in civilian life.

Even at the teen ages, there are emotional strains which may lead to suicide. During these years, the sex difference in the suicide rate is striking, and the figures rise steadily with age. At ages 18-19 years, the rate for boys is 3.7 per 100,000—three times that for girls.

Violent deaths are primarily responsible for the large excess of male over female mortality from all causes at the teen ages. When the record for disease alone is considered, the difference in death rates between the sexes is relatively small. It also becomes evident that much of the rise in death rates with age is due to the violent causes. Equally impressive are the extremely low death rates from the principal diseases.

The leading cause of death from disease throughout the teen-age period is cancer and other malignant tumors, these accounting for about one fifth of the deaths from natural causes in each age and sex category. Leukemia, the major condition among the malignancies, was responsible for one half of these deaths at ages 13-14 years and for about one third at ages 18-19 years. Ranking next in importance to the cancer group are diseases of the heart, including rheumatic fever; for these diseases, the death rates rise steadily with age. Tuberculosis is now relatively unimportant as a cause of death among teen-agers, except among girls at 18-19 years, where it accounts for about one ninth of all deaths from disease. Currently, acute poliomyelitis outranks tuberculosis in the mortality picture at the earlier teen ages.

The recent tendency toward early

marriage and parenthood has brought the health problems of family life to an increasing proportion of teen-age girls. About one third of our brides and about one fourth of the mothers bearing a first child are less than 20 years old. Almost 6 percent of the deaths among 18- and 19-year-old girls in the insurance experience were due to pregnancy and childbirth.

The record shows clearly that most of the immediate threats from disease to the lives of teen-agers have been removed. Nevertheless, a number of important health problems still remain. Relatively, the problems of mental and emotional adjustment of teen-agers loom larger than ever before. Many difficulties arise because of the complex and rapid changes that occur in this period of life. During these years special attention must be given to

MORTALITY AND DISTRIBUTION OF DEATHS FROM SELECTED CAUSES AMONG TEEN-AGERS, METROPOLITAN LIFE INSURANCE COMPANY, INDUSTRIAL DEPARTMENT 1950-1952
WHITE PERSONS, BY SEX

CAUSE OF DEATH	DEATH RATES PER 100,000						PERCENT OF TOTAL					
	AGES 13-14		AGES 15-17		AGES 18-19		AGES 13-14		AGES 15-17		AGES 18-19	
	MALES	FEMALES	MALES	FEMALES	MALES	FEMALES	MALES	FEMALES	MALES	FEMALES	MALES	FEMALES
ALL CAUSES—TOTAL*	61.1	35.3	91.7	46.3	135.6	55.1	100.0	100.0	100.0	100.0	100.0	100.0
Total Disease	30.1	28.1	38.6	31.5	44.6	38.9	49.4	79.7	42.0	67.8	32.8	70.7
Total Violence	31.0	7.2	53.1	14.8	91.0	16.2	50.6	20.3	58.0	32.2	67.2	29.3
Tuberculosis	1.3	1.3	1.7	2.4	2.4	4.5	2.1	3.7	1.8	5.1	1.8	8.1
Acute poliomyelitis	3.0	1.8	2.3	1.9	1.6	1.2	4.9	5.2	2.5	4.0	1.2	2.1
Malignant neoplasms	6.5	5.3	8.6	5.6	9.6	7.3	10.6	14.9	9.4	12.1	7.1	13.3
Leukemias	3.6	2.4	3.9	1.8	3.3	2.0	5.9	6.9	4.1	3.9	2.4	3.7
Diseases of heart and rheumatic fever	3.5	3.4	5.3	3.9	5.9	5.1	5.7	9.7	5.9	8.4	4.4	9.2
Pneumonia and influenza	1.9	1.2	3.2	1.6	3.4	1.1†	3.2	3.4	3.5	3.6	2.5	1.9†
Nephritis and nephrosis	1.2	1.9	1.9	2.0	2.7	2.5	1.9	5.4	2.1	4.3	2.0	4.6
Complications of pregnancy and childbirth	—	—	—	.6†	—	3.1	—	—	—	1.4†	—	5.6
Congenital malformations	1.5	1.0†	2.2	1.8	2.6	1.7	2.5	2.9†	2.4	3.9	1.9	3.1
Accidents—Total	29.3	6.9	50.0	13.5	85.7	14.7	47.9	19.5	54.5	29.3	63.2	26.9
Motor vehicle	8.6	4.3	26.7	10.4	52.3	11.8	14.1	12.0	29.1	22.4	38.6	21.4
Drowning	7.5	.8†	9.6	.6†	10.6	.6†	12.3	2.3†	10.5	1.4†	7.8	1.2†
Firearms	5.2	.2†	4.3	—	5.3	—	8.5	.6†	4.7	—	3.9	—
Home	5.3	1.0†	2.9	.9	2.3	.7†	8.7	2.9†	3.2	2.0	1.7	1.3†
Occupational—civilian	.3†	—	2.4	—	7.1	.1†	.5†	—	2.7	—	5.2	.2†
Suicide	1.3	.1†	2.3	.6†	3.7	1.2	2.1	.3†	2.5	1.4†	2.7	2.1
Homicide	.4†	.2†	.8	.7†	1.6	.3†	.6†	.6†	.9	1.5†	1.2	.6†

*Excluding enemy action. The death rate from enemy action for males was 4.5 at ages 15-17, and 58.2 at ages 18-19.
†Based on 10 deaths or less.

health habits. A high proportion of teen-agers have poor teeth and defective vision, with need for remedial measures for both conditions. Many youngsters, particularly girls, show the effects of poor dietary habits.

The high toll of fatal accidents among teen-agers presents special problems. It is common for them—especially the boys—to take undue risks. However, they can be taught the lessons of caution and safety in a program in which the home and the school join with other community agencies. The problem of teen-age motor vehicle accidents is particularly acute, requiring special measures. A prime need is more widespread instruction in automobile driving during the high school years. Adults have a contribution to make also, by setting good examples to teen-agers with regard to careful driving habits and to proper attitudes toward highway rules and regulations.

The Continuing Rise in Longevity of the Industrial Population

THE average length of life among American wage-earners and their families reached a new high of 68.5 years in 1952, according to the experience of the Industrial policyholders of the Metropolitan Life Insurance Company. Although this is not much above the figure for 1951, it marks the ninth year of consecutive rise. The gain in average lifetime among these insured persons amounts to 5 years since 1941, to 10 years since 1932, and to 22 years since 1911-1912, just four decades ago. In 1879-1889, the earliest period with a comparable figure, the average lifetime was only 34 years—less than half that for 1952. Table 1, on page 5, traces the course of the average lifetime for these insured lives from the earliest period.

Particulars regarding mortality and longevity among the Industrial policyholders during 1952 at every fifth age from 5 to 65 years are shown in Table 2. The mortality rates in wage-earning families as represented by this experience are very low in early life. Details for individual ages show mortality rates under 1 per 1,000 for white males at ages 4 to 16, white females at ages 2 to 31, colored males at ages 5 to 13, and colored females at ages 5 to 16. However, after childhood the room for reduction in colored mortality is still considerable when compared with that for white persons. Among females the rates for the colored are at least double those for the whites throughout the childbearing period. In the case of males the difference between the races is not as large as for females; nevertheless, at ages 15 to 39 the ratio of colored to white mortality among males exceeds 1½.

It is instructive to compare some of the details regarding longevity for 1952 with the corresponding situation for 1946, the first postwar year. In this brief period, white males at age 5 gained 1.3 years, their expec-

TABLE 1—EXPECTATION OF LIFE AT BIRTH
PREMIUM-PAYING BUSINESS, INDUSTRIAL DEPARTMENT*
METROPOLITAN LIFE INSURANCE COMPANY, 1879-1889 TO 1952

CALENDAR YEAR	EXPECTATION IN YEARS	CALENDAR YEAR	EXPECTATION IN YEARS	CALENDAR YEAR	EXPECTATION IN YEARS
1952†	68.5	1940	62.9	1928	55.9
1951†	68.4	1939	62.5	1927	56.4
1950†	68.3	1938	61.9	1926	55.0
1949	67.7	1937	60.7	1925	55.5
1948	67.2	1936	60.3	1924	55.6
1947	66.5	1935	60.2	1923	54.5
1946†	65.6	1934	59.5	1922	55.0
1945†	64.9	1933	59.2	1921	55.1
1944†	64.4	1932	58.8	1919-1920	51.1
1943†	63.9	1931	57.9	1911-1912	46.6
1942†	64.3	1930	57.4	1879-1889	34.0
1941	63.4	1929	55.8		

Gain, 1952 since 1911-1912, 21.9 years; since 1879-1889, 34.5 years.

*The figures for 1948 to 1952 relate to the total Industrial Department—Weekly and Monthly premium-paying business combined; prior to 1948 the figures pertain to the Weekly business alone.

†Excludes deaths from enemy action.

TABLE 2—EXPECTATION OF LIFE AND MORTALITY RATE PER 1,000 AT SPECIFIED AGE BY COLOR AND SEX. TOTAL PREMIUM-PAYING BUSINESS, INDUSTRIAL DEPARTMENT METROPOLITAN LIFE INSURANCE COMPANY, 1952

AGE	EXPECTATION OF LIFE					MORTALITY RATE PER 1,000				
	Total Persons	WHITE		COLORED		Total Persons	WHITE		COLORED	
		Males	Females	Males	Females		Males	Females	Males	Females
5	65.9	62.9	68.8	60.5	63.6	0.6	0.7	0.5	0.9	0.8
10	61.0	58.1	63.9	55.7	58.7	.4	.5	.3	.5	.4
15	56.2	53.3	59.0	50.9	53.8	.7	.8	.4	1.3	.8
20	51.4	48.5	54.2	46.3	49.1	1.1	1.4	.6	2.5	1.6
25	46.7	43.9	49.3	41.9	44.6	1.3	1.7	.7	2.8	2.0
30	42.0	39.2	44.5	37.5	40.0	1.5	1.8	.9	3.5	2.5
35	37.3	34.6	39.7	33.2	35.6	2.1	2.4	1.3	4.8	3.8
40	32.8	30.1	35.0	29.0	31.3	3.3	4.3	2.1	6.4	5.3
45	28.4	25.9	30.5	25.0	27.2	5.3	7.1	3.5	9.3	7.3
50	24.2	21.9	26.1	21.3	23.2	8.3	11.4	5.5	13.1	11.1
55	20.3	18.3	21.9	17.8	19.6	12.5	17.8	8.6	19.0	15.4
60	16.7	15.0	17.9	14.6	16.2	18.5	25.6	13.5	28.6	21.5
65	13.4	12.1	14.2	11.8	13.0	28.6	38.0	22.1	41.7	31.5

NOTE Excludes deaths from enemy action.

tation of life reaching a level of 62.9 years in 1952. This gain would have been greater were it not for the high mortality from accidents and other hazards encountered by young men in military training. Among white females at age 5, the rise was greater, amounting to 2.2 years, with 68.8 years as the expectation of life in 1952. The corresponding improvement among colored lives was even more rapid—namely, 2.3 years for males and 3.3 years for females. However, the recent record for colored lives still lags considerably behind that for white persons; the expectation of life at age 5 in 1952 was 60.5 years for colored males and 63.6 years for the females.

At the threshold of midlife, the improvements in expectation of life since 1946 among these insured persons are still noteworthy, especially for females. Whereas the gain in expectation of life at age 45 amounted to only one half year for white males, the rise came to 1.4 years for white females. In the case of colored lives the corresponding gains in expectation of life were 1 year for males and 1.5 years for females.

The record for gains in longevity among our wage-earning families, when compared with that for the general population, is particularly impressive. In 1911-1912, the earliest year of comparison, the average lifetime for Industrial policyholders was about 6½ years less than that for the country as a whole; currently the two are on a par. It is significant of our American way of life that the health status of the wage-earning segment of our population has now caught up with the general average for the country.

The Outlook for Growth of Our School Population

THE remaining years of the present decade will witness a steady rise in our school-age population, their number increasing by an average of more than 1,000,000 annually. As of midyear 1953 there were 34,775,000 children at ages 5 to 17 in the United States; in the next seven years their number will rise by more than one fifth, reaching a total of 42,244,000 in 1960. This expected growth reflects essentially the marked upswing in births following the close of World War II. Estimates of the future school-age population for the country as a whole and for the four main geographic regions are shown in the table on page 7.

The center tier of the table relates to children of ages 5 to 13 years, the period of life when most boys and girls are attending kindergarten or elementary school. There were over 25¾ million children of these ages in the entire United States on July 1st of this year, a gain of almost 1½ million children, or 6 percent, since 1952. Most communities in the country have already been pressed to meet the problems created by this rapid rise in children of elementary school age. Moreover, the outlook is that such problems will be intensified in the coming years, as the number

FORECAST OF SCHOOL-AGE POPULATION, UNITED STATES BY REGION: 1952 TO 1964

YEAR	NUMBER IN THOUSANDS					PERCENTAGE INCREASE OVER 1952				
	UNITED STATES	NORTH-EAST	NORTH CENTRAL	SOUTH	WEST	UNITED STATES	NORTH-EAST	NORTH CENTRAL	SOUTH	WEST
	AGES 5-17									
1952	33,170	7,717	9,452	11,826	4,184					
1953	34,775	8,084	9,950	12,332	4,409	5	5	5	4	5
1954	36,027	8,356	10,259	12,764	4,602	9	8	9	8	10
1955	37,069	8,561	10,493	13,070	4,775	12	11	13	11	14
1956	37,934	8,730	10,672	13,301	4,931	14	13	16	12	18
1957	39,122	9,060	11,338	13,611	5,113	18	17	20	15	22
1958	40,295	9,294	11,744	13,941	5,316	21	20	24	18	27
1959	41,353	9,518	12,111	14,232	5,492	25	23	28	20	31
1960	42,244	9,714	12,441	14,436	5,653	27	26	32	22	35
	AGES 5-13									
1952	24,371	5,655	6,976	8,603	3,117					
1953	25,797	6,005	7,378	9,039	3,315	6	7	6	5	6
1954	26,832	6,280	7,669	9,390	3,493	10	11	10	9	12
1955	27,670	6,445	7,957	9,636	3,632	14	14	14	12	17
1956	28,294	6,571	8,201	9,770	3,752	16	16	18	14	20
1957	28,729	6,610	8,360	9,923	3,836	18	17	20	15	23
1958	29,340	6,703	8,587	10,106	3,944	20	19	23	17	27
1959	29,998	6,874	8,875	10,220	4,029	23	22	27	19	29
1960	30,607	7,003	9,125	10,406	4,133	26	24	31	21	33
	AGES 14-17									
1952	8,828	2,062	2,476	3,223	1,067					
1953	8,978	2,079	2,572	3,293	1,094	2	*	4	2	3
1954	9,189	2,076	2,630	3,374	1,109	4	1	6	5	4
1955	9,399	2,116	2,706	3,434	1,143	6	3	9	7	7
1956	9,640	2,159	2,771	3,531	1,179	9	5	12	10	10
1957	10,393	2,450	2,978	3,688	1,277	18	19	20	14	20
1958	10,955	2,591	3,157	3,835	1,372	24	26	28	19	29
1959	11,355	2,644	3,236	4,012	1,463	29	28	31	24	37
1960	11,577	2,711	3,316	4,030	1,520	31	31	34	25	42
1961	12,321	2,905	3,496	4,285	1,635	40	41	41	33	53
1962	13,156	3,070	3,745	4,591	1,750	49	49	51	42	64
1963	13,722	3,230	3,932	4,742	1,818	55	57	59	47	70
1964	14,220	3,314	4,119	4,895	1,892	61	61	66	52	77

*Decrease of 2 percent.

NOTE: Estimates prepared by the Statistical Bureau, Metropolitan Life Insurance Company, from basic data published by the Bureau of the Census and National Office of Vital Statistics. The figures relate to July 1st of each year.

of children at ages 5 to 13 increases to an expected total of 30⅔ million in 1960.

All regions of the country will share in the rise of the elementary school population to new peaks, with the rate of growth highest in the West and lowest in the South. The

indications are that from 1952 to 1960 the number of children at ages 5 to 13 will increase 33 percent in the West, 31 percent in the North Central States, 24 percent in the Northeast, and 21 percent in the South. However, these estimates make no allowance for future inter-State migration. If the westward movement of population continues, the rise on the Pacific Coast will be greater than that indicated in the table.

Our high schools are only now beginning to experience the effects of the post-depression upswing in births, but in the closing years of this decade their registers will be expanding at a faster rate than those for elementary schools. The rise in children of high school age, 14 to 17 years, was only 150,000 between mid-1952 and mid-1953, but it will amount to more than 750,000 in the single year from 1956 to 1957. In fact, our country will have well over 11½ million children of high school age by 1960. Thus, within the short space of eight years after 1952 their number will grow by 31 percent, whereas the comparable rise for children of elementary school age will be only 26 percent. Moreover, the high school age population will very likely continue upward to a total of almost 14¼ million children by 1964.

The geographic pattern for the increases in the high school age population conforms closely to that for the elementary school children. Even without taking into account any migration toward the West, that region may expect an increase of about 77 percent in the number of children at ages 14 to 17 years from 1952 to 1964. In the Northeast and North Central States the prospects are for increases of 61 percent and 66 percent, respectively. The relative increase is least rapid for the South—namely, 52 percent. However, the actual number of children in the South increases by 1,672,000, or almost one third of the nation-wide gain from 1952 to 1964. The problems of high school enrollment in the South will also be magnified by the increasing tendency for children to continue their schooling.

The problems of providing adequate school facilities and teaching staffs to meet the needs of the rapid growth of our school-age population are already with us. These problems will be even larger in the years ahead, particularly at the secondary school level. In this situation, each community must seek its own solution, adapted to its individual circumstances; at the same time it can benefit by observing the experience of others.

Hurricane Death Toll Greatly Reduced

THERE is nothing that men can do to prevent hurricanes; but there is much that they can do—and, indeed, have done—to prevent the loss of life in storms of such intensity.

In the past 30 years hurricanes have taken some 3,615 lives in the United States. Only 239—or less

than 7 percent of the total—were killed in the 14 years since 1938, the last year when losses were relatively heavy. The marked reduction in fatalities results largely from the successful efforts of the Weather Bureau and the military services to search out and track these storms while they are still far from our shores and to issue early warnings. Through weather reconnaissance, often with radar-equipped aircraft, and through various other means, hurricanes can be detected several days before they strike an area in their path.

Although deaths during the past 30 years were largely concentrated in the period prior to 1939, the number of reported hurricanes causing loss of life in our country was virtually equally divided between the two periods; the essential data are shown in Table 1 on this page. After 1938 no more than about 50 deaths were suffered in any one storm. This was the toll exacted in Mississippi, Florida, and Louisiana by the Gulf Coast hurricane of September 1947. Almost as great was the loss of life in the storms that struck the Carolinas and Georgia in August 1940 and the Northeast in September 1944.

On the other hand, four hurricanes in the period 1926-1938 took more than 3,000 lives. The most disastrous of these was the storm in September 1928 which caused 1,836 deaths in Florida. Just a decade later a hurricane moving along the Atlantic seaboard suddenly headed inland and killed 657 persons, most of them in New England. The two other major storms struck Florida in 1926 and 1935, taking 243 and 409 lives, respectively.

Florida, in fact, accounted for more than 70 percent of all the lives lost in hurricanes in the United States during the past 30 years. In this period Rhode Island ranks second: all its 380 deaths occurred in the one storm of 1938. Following in

TABLE 1—NUMBER OF HURRICANES CAUSING DEATHS IN THE UNITED STATES, 1923 TO 1952

YEAR	HURRICANES	DEATHS	YEAR	HURRICANES	DEATHS	YEAR	HURRICANES	DEATHS
1952	1	2	1942	1	8	1932	2	42
1951	0	0	1941	2	9	1931	0	0
1950	4	19	1940	2	49	1930	0	0
1949	2	6	1939	0	0	1929	1	3
1948	1	3	1938	1	657	1928	3	1836
1947	3	53	1937	0	0	1927	0	0
1946	0	0	1936	1	9	1926	3	209
1945	2	7	1935	2	414	1925	1	6
1944	2	64	1934	2	18	1924	1	2
1943	1	19	1933	4	100	1923	0	0

NOTE: Information compiled by the Statistical Bureau from the reports of the United States Weather Bureau and other sources.

TABLE 2.—NUMBER OF HURRICANES CAUSING DEATHS IN THE UNITED STATES BY STATE, 1923 TO 1952

STATE	HURRICANES	DEATHS	STATE	HURRICANES	DEATHS
Total	42*	3,615†			
South Atlantic			Middle Atlantic		
Delaware	1	2	New York	3	77
Maryland	1	21	New Jersey	3	22
Virginia	2	20	Pennsylvania	1	15
North Carolina	5	47	New England		
South Carolina	4	24	New Hampshire	1	14
Georgia	3	4	Vermont	1	7
Florida	15	2,556	Massachusetts	3	137
South Central			Rhode Island	1	380
Alabama	2	3	Connecticut	2	89
Mississippi	2	26			
Louisiana	4	41			
Texas	10	111			

*The total exceeds the sum in the individual States because one hurricane may hit several States.
†Includes 19 deaths for which the State is unknown.

order are Massachusetts, with 137 deaths; Texas, with 111; and Connecticut, with 89. Fourteen other States along the Atlantic or the Gulf Coast had fatalities, as may be seen in Table 2. The geographic concentration of these deaths is related to the fact that only these areas are struck by hurricanes which blow in from the West Indies or the Gulf of Mexico.

Hurricanes are most likely to occur in the late summer or early fall; 14 of the 42 fatal storms recorded since 1923 occurred in August and 16 in September. The latter month witnessed the most serious of the disasters and caused 3,318 deaths, or well over 90 percent of the total. All three of the fatal hurricanes in the New England States occurred in September.

Hurricanes are one of nature's most feared threats. Yet, casualties from such storms can be kept to a minimum by taking heed of the warnings issued by the Weather Bureau. This makes it possible for people to take adequate precautions, to seek shelter or, if necessary, to evacuate the area. An outstanding example of the effectiveness of early hurricane warnings is the loss of only two lives in Florida in the unusually severe hurricane which hit that State in August 1949.

DEATH RATES* PER 100,000 POLICYHOLDERS FROM SELECTED CAUSES
INDUSTRIAL PREMIUM-PAYING BUSINESS, WEEKLY AND MONTHLY COMBINED
METROPOLITAN LIFE INSURANCE COMPANY

July 1953

CAUSE OF DEATH	ANNUAL RATE* PER 100,000 POLICYHOLDERS				
	JULY		YEAR-TO-DATE		
	1953	1952	1953	1952	1951
All Causes—total	679.6	635.9	673.8	674.3	676.1
Tuberculosis (all forms)	9.7	12.4	10.9	15.6	18.3
Tuberculosis of respiratory system	8.8	11.1	9.7	14.2	16.6
Syphilis	2.5	2.2	2.7	2.8	3.9
Communicable diseases of childhood	.5	.8	.4	.7	.6
Acute poliomyelitis	.8	.7	.5	.3	.3
Malignant neoplasms	128.9	120.2	122.6	122.6	122.3
Digestive system	46.1	44.7	43.3	46.5	47.0
Respiratory system	16.2	13.6	14.8	13.9	13.7
Diabetes mellitus	16.9	14.0	15.9	14.3	13.8
Diseases of the cardiovascular-renal system	336.4	318.5	342.5	347.4	347.8
Vascular lesions, central nervous system	72.0	65.1	67.8	70.9	66.5
Diseases of heart	239.9	229.6	251.8	251.2	254.9
Chronic rheumatic heart disease	11.3	12.2	13.1	13.7	14.2
Arteriosclerotic and degenerative heart disease	179.7	163.7	187.0	182.6	185.1
Hypertension with heart disease	39.9	43.5	41.6	44.2	44.9
Other diseases of heart	9.0	10.2	10.1	10.7	10.7
Hypertension without mention of heart	6.3	6.1	5.9	6.2	6.6
General arteriosclerosis	6.0	6.4	6.1	6.9	6.6
Nephritis and nephrosis	12.2	11.3	10.9	12.2	13.2
Pneumonia	12.1	10.8	17.7	17.9	18.6
Influenza	.2	.6	3.8	2.4	3.7
Ulcers of stomach and duodenum	4.5	3.9	4.7	4.6	4.5
Appendicitis	1.3	2.2	1.3	1.5	1.4
Hernia and intestinal obstruction	4.7	3.1	3.9	3.8	4.1
Gastritis, duodenitis, enteritis, etc.	2.8	2.9	2.3	3.0	2.7
Cirrhosis of liver	8.6	8.9	10.1	10.0	9.0
Complications of pregnancy, childbirth	.9	1.8	1.3	1.4	1.4
Suicide	5.4	6.5	5.5	6.3	6.5
Homicide	2.5	3.1	2.5	2.6	2.5
Accidents—total	51.1	48.7	37.7	40.8	37.3
Motor vehicle	18.4	14.6	14.9	14.8	14.2
Home	6.3	7.6	6.8	7.3	7.6
Occupational (civilian)	3.2	3.6	3.2	3.6	3.6
War deaths—enemy action	2.6	3.5	2.0	2.5	6.6
All other causes	87.1	70.9	85.3	73.8	68.8

*The rates for 1953 are provisional.

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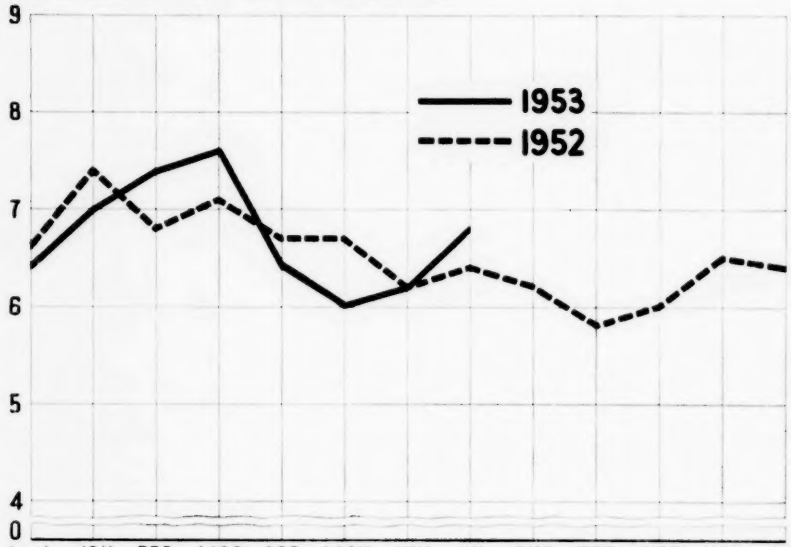
DEATH RATES PER 1,000 POLICYHOLDERS • ANNUAL BASIS



(DEC)	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
1952	7.4	6.8	7.1	6.7	6.7	6.2	6.4	6.2	5.8	6.0	6.5	6.4
1953	7.0	7.4	7.6	6.4	6.0	6.2	6.8					

1953 figures are provisional

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